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SUBJECT: BANGLADESH HEALTH MINISTER FOCUSED ON FAMILY PLANNING AND
LOCAL HEALTH PROGRAMS

SUMMARY

1. (SBU) Family planning and improving local health care programs are top priorities for Bangladesh's Health Minister, Dr. A.F.M. Ruhul Haque. Minister Haque welcomed USG-funded health programs and emphasized the importance of decentralization to improving health services in Bangladesh. The Ambassador highlighted private sector initiatives in the health sector here.

GOB HEALTH PLANS

2. (SBU) Bangladesh's Health Minister, Dr. A.F.M. Ruhul Haque, accompanied by the Health Secretary, told the Ambassador and USAID Mission Director July 7 that 20 years ago Bangladesh's family planning programs were robust and successful. The Minister observed, however, that Government of Bangladesh (GOB) programs had lost momentum over the past several years, noting his top priority was to resuscitate family planning in Bangladesh.

3. (SBU) According to Minister Haque, Prime Minister Sheikh Hasina is focused on quickly revitalizing the delivery of health care services, particularly community clinics. As a first step, Haque said the Awami League Government planned to restart 18,000 community clinics the opposition Bangladesh Nationalist Party (BNP) scrapped during its 2001-2006 government. Minister Haque acknowledged that centralization and bureaucracy stymied GOB efforts to meet local needs. While there were more than 10,000 unemployed medical doctors in Bangladesh, over-centralization and bureaucratic inertia had stalled the Health Ministry's recruitment of doctors to fill 4,000 vacant slots. The Minister said the PM planned to use ad hoc appointments to overcome these obstacles. When the Ambassador asked how the ministry planned to address Bangladesh's nursing shortage, Haque said his ministry hoped to double its nursing cadre by forcing all new hospitals to open nursing schools. Simultaneously the Ministry would work with the hospitals to intensify training of medical technologists.

USG INTERNATIONAL HEALTH PRIORITIES

4. (SBU) The Ambassador previewed aspects of President Obama's FY 2010 Global Health Initiative. The initiative would focus on:
--integrating global health programming while retaining US leadership in HIV/AIDS, Tuberculosis and Malaria;
--increasing efforts to reduce child mortality, improve maternal health and avert unintended pregnancies;
--strengthening health care systems in developing countries;
--improving efficiency in the deployment of health resources; and
--increasing financial support for agriculture and food security programs to cut global hunger.
While uncertainty existed about funding for this initiative, the Ambassador noted that many of these priorities could support programs in Bangladesh.

15. (SBU) The Ambassador highlighted for the Minister aspects of USAID's health programs and the USG's commitment to coordinating its efforts with donors supporting Bangladesh's Health, Nutrition and Population Sector Program (HNPS). The Health Secretary praised USAID's programs for filling gaps not covered by the 4.2 billion USD multi-donor HNPS sector program. The Minister criticized the vertical nature of some programs and urged stronger coordination of USAID activities to help strengthen the health system. The USAID Mission Director explained that the current USG health assistance commitment to Bangladesh was 174 million USD over five years and was aligned both with the Government's health strategy and the HNPS. The Ambassador invited the Health Minister to participate in two upcoming events to showcase USG work in family planning, safe motherhood and maternal/child health.

PRIVATE US INVESTMENT IN BANGLADESH HEALTH SECTOR

16. (SBU) In addition to USG assistance for health care, U.S. businesses also were investing in the health sector, the Ambassador noted. A consortium of American business people and health professionals, including Bangladeshi-Americans, had invested 4 million USD in refurbishing and running a private hospital in Dhaka. The Ambassador urged the Health Ministry and GOB to support projects like this private hospital, which brought high quality health care, technology and medical expertise to Bangladesh. Claiming he supported the involvement of the private sector, the Minister described his support for a village hospital in his constituency that drew on the expertise of Americans and other expatriate Bangladeshis.

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COMMENT

17. (SBU) The Health Minister warmly supported USG assistance in Bangladesh's health sector. He acknowledged the GOB could not "go it alone" and needed help from donors, non-governmental organizations (NGOs) and the private sector. In a highly centralized country, the Minister's emphasis on the need for local solutions to health care challenges was encouraging.

MORIARTY